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TESTIMONY

Delivered by Susan F. Adams, Vice President of Alliance Integration

Masonicare

Before the Public Health Committee

March 18, 2019

HB 5898: An Act Concerning Aid in Dying for Terminally III Patients

Senator Abrams, Representative Steinberg and members of the Public Health Committee, My name is Susan Adams, Vice President of Alliance Integration at Masonicare. Masonicare is a full continuum of Care specializing in Senior Services and has a state-wide Home Health and Hospice presence. Our current Palliative and Hospice census is over 400 patients. I am also the past chairman for the CT Association for Healthcare at Home and the current committee chair for the Government Relations committee.

Every one of us is going to die at some point.

You may only get one chance to do it the way you want.

There are NO "do-overs"

Should this bill move forward it must be done in tandem with education about patient choice. There are many viable alternatives to the option outlined in this bill. Death is not a one size fits all situation.

Educated decision making encompasses not only the opportunity to know what other choices are available but also to truly understand all of the components of each choice.

Having the opportunity to explore options, ask question, get complete and accurate answers and consult with family and friends is the right of every individual who is given the opportunity to make a choice.

The time to gain the knowledge of options for end of life care is not when death is imminent.

We all have a responsibility to our family and friends, as well as ourselves, to begin that educational experience now, when emotions are not running high or time is running out.

Palliative Care is for people of any age and at any stage in an illness, whether that illness is curable, chronic or life threatening. If you or a loved one are suffering from symptoms of a disease or disorder, be sure to ask your current physician for a referral for a palliative care consult.

Hospice Care, specific to the Medicare Hospice Benefit, is available to a patient if 2 physicians determine that the patient has 6 months or less to live if the terminal illness runs its normal course. Hospice is a form of palliative care but offered later in the illness.

The State of Connecticut is 49th in the Nation in terms of LOS (Length of Stay) for Hospice patients which means that patients who sign on to the Hospice program in CT are not able to experience all of the benefits of the program, due to the very short period of time they receive services.

The very personal decision to choose an end of life plan, and which one, the best one for them and their family, is dependent on education and full transparency.

We implore you to include patient education and patient choice when considering the future of this bill.

Thank you for taking my testimony into consideration.

Respectfully submitted,

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